

We are for youth development, healthy living, and social responsibility

Thank you for your interest in the NEW ROCHELLE YMCA!

If you would like to join the New Rochelle YMCA staff team, please complete the application below.

- Be sure to write legibly.
- The application must be completed in full.
- Do not leave any spaces blank or write "see resume" in response to any question.
- Read and sign the last page of the application.

Race: Native American Hispanic Asian/Pacific Isl. Caucasian African American Other

Position Applying For:		Date:	
YMCA Location:		Date Available:	
NAME:		E-mail:	
Last	First	MI	
Address:			
Street	City	State ZIP	<b>.</b>
Telephone: Home/	Business/	Mobile /	

Are you 18 years of age or older? (If not, you may be required to provide work authorization.)	Yes, No
If hired, can you provide verification of your legal right to work in the United States?	Yes, No
Can you perform the essential functions of the job for which you are applying, with or without reasonable accommodation?	Yes, No
Have you ever been convicted of a crime, pled no contest, or had adjudication withheld? If yes, please provide a date, location, charges and a complete explanation of all offenses. (A conviction will not necessarily bar employment. The YMCA may consider the nature, date and circumstances of the offenses.)	Yes, No

Notice to All Applicants: The YMCA enforces its policies and practices to prevent child abuse. Allegations or suspicions of child abuse are taken very seriously at the NRYMCA and will be reported to the proper authorities for investigation. We have abuse reporting procedures, there are unscheduled visits from supervisors, we have an open door for parents, and we have a code of conduct for staff. We minimize opportunities for abuse to occur and we talk with children about personal safety and touching limits. We also screen carefully to prevent abusers from being hired and we provide child abuse prevention training to staff.

Employment Info	rmation					
List available days/h	nours:					
Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Preferred Job Status:	Full-time Pa	Part-time SeasonalAs	Needed			
Have you previously	been employed by	/ this YMCA or any	other YMCA?		Yes	No
If yes, when? At wh	ich locations?					
Have you previously volunteered at this YMCA or any other YMCA?				Yes	No	
If yes, when? At wh	ich locations?					
Do you have any relatives or household members currently working for this YMCA?				Yes	No	
If yes, name(s) and	l relationship:					
How did you hear abo				YMCA staff referral	YMCA n	
Name of referral source:				School	Advertise	
				Walk-in YMCA website	Other	

## Education & Training

Educational Background					
	Name of School	City, State	Diploma Awarded	Degree	Major
High School			Yes		
or			No		
GED			In Progress		
			Yes		
College			No		
			In Progress		
Graduate			Yes		
School			No		
School			In Progress		
37 . 1/			Yes		
Vocational/			No		
Other					
<u> </u>			In Progress		

Describe any non-employment experience such as school or volunteer activities that might strengthen your application:

Safety & Job Specific Certifications				
Type (CPR, First Aid, CDA, etc.)	Provider	Level	Expiration	

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List all previous employment during the past seven years starting with the most recent. Use additional sheets if needed.

Employer	Telephone	Dates Employed	Summarize the nature of the work	
	/	From:/	performed and job responsibilities.	
Address		To:/		
Job Title		Starting Hourly Rate/Salary		
Immediate Supervisor and Title		\$per		
Reason for Leaving		Ending Hourly Rate/Salary		
		\$ per		
May we contact this employer?	Yes No	* I		
Employer	Telephone	Dates Employed	Summarize the nature of the work	
Address	/	From:/	performed and job responsibilities.	
		To:/		
Job Title		Starting Hourly Rate/Salary		
Immediate Supervisor and Title		\$per		
Reason for Leaving		Ending Hourly Rate/Salary		
		\$per		
May we contact this employer?	Yes No	· 1		
Employer	Telephone	Dates Employed	Summarize the nature of the work	
Address	/	From:/	performed and job responsibilities.	
Address		To:/		
Job Title		Starting Hourly Rate/Salary		
Immediate Supervisor and Title		\$ per		
Reason for Leaving		Ending Hourly Rate/Salary		
		\$ per		
May we contact this employer?	Yes No	· 1		
Employer	Telephone	Dates Employed	Summarize the nature of the work	
Address	/	From:/	performed and job responsibilities.	
Address		To:/		
Job Title		Starting Hourly Rate/Salary		
Immediate Supervisor and Title		\$per		
Reason for Leaving		Ending Hourly Rate/Salary		
		\$ per		
May we contact this employer?	Yes No	P**		
Please explain any gaps in your employment history.				
What other business experience, perso	onal experience or traini	ng have you had that may have	prepared you for this position?	

**Personal References** 

Name:	Relationship:	Years Known:
Address:	City:	State: Zip:
E-mail:	Phone: /	Alternate #: /
Name:	Position:	Years Known:
Address:	City:	State: Zip:
E-mail:	Phone: /	Alternate #:/
Name:	Position:	Years Known:
Address:	City:	State: Zip:
E-mail:	Phone: /	Alternate #:/

## Application Acknowledgement and Authorization

## Please read all statements and sign below:

I authorize both the NRYMCA and persons listed (references, schools, current (unless noted) and former employers and any others with whom you desire to check) to communicate with regard to any relevant information that may be required to reach an employment decision. I agree to hold such persons harmless with respect to any information they may supply. I understand and agree that any offer of employment is contingent upon successful completion of all background check processes, including a criminal history background check.

I certify that all information provided by me in this application is correct, accurate and complete to the best of my knowledge. I understand that the falsification, misrepresentation, or omission of any facts in this application or any other document submitted in connection with YMCA employment will result in denial of employment or termination of employment regardless of the timing or circumstances of discovery.

If I am employed by the YMCA I understand my employment can be terminated, with or without cause and with or without notice, at any time at the option of the YMCA or myself. I understand that, other than the CEO of the YMCA, no manager, supervisor or representative of the YMCA has authority to enter into any agreement for employment for any specific period of time, or to make any agreement contrary to the foregoing. Only the CEO of the YMCA has the authority to make any agreement contrary to the foregoing and then only in writing. I further expressly agree that, with respect to the at-will employment relationship, this constitutes the full, complete and final expression of the parties' intent concerning the nature of any employment relationship between myself and the YMCA.

I understand that all offers of employment are conditional upon my ability to provide appropriate documents regarding my identity and legal right to work in the United States.

I understand that this application is only valid for the position applied for at present and that the YMCA is not obligated to retain or consider this application for future openings. If hired, I agree to abide by YMCA policies and rules at all times. I acknowledge that I have read the above statements and understand them.

Signature:

Date: